

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) Belmont Bank & Trust Company 8250 West Belmont Avenue Chicago, IL 60634

Doc#: 1219234038 Fee: \$42.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 07/10/2012 09:26 AM Pg: 1 of 3

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME 1870 NORTH DAMEN AVE., LLC 1b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 1c. MAILING ADDRESS POSTAL CODE COUNTRY 2847 N PULASKI RD, STE CS CHICAGO IL 60641 USA 1d. SEE INSTRUCTIONS ADD'L INFO RE 16. TYPE OF ORGAN' ZATIC N 1f. JURISDICTION OF ORGANIZATION

1g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debt or name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 2d. SEE INSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF OF GALIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party nation (3a of 3b)

3a. ORGANIZATION'S NAME **BELMONT BANK & TRUST COMPANY** 3b INDIVIDUAL'S LAST NAME FIRST NAME AIDCLE NAME SUFFIX

3c. MAILING ADDRESS OSTAL CODE COUNTRY 8250 WEST BELMONT AVENUE CHICAGO 50634 IL USA

4. This FINANCING STATEMENT covers the following collateral

All inventory, equipment, accounts (including but not limited to all health-care-insurance receivables), chattel paper, instruments (including but not limited to all promissory notes), letter-of-credit rights, letters of credit, documents, deposit accounts, investment property, money, other rights to payment and performance, and general intangibles (including but not limited to all software and all payment intangibles); all oil, gas and other minerals before extraction; all oil, gas, other minerals and accounts constituting as-extracted collateral; all fixtures; all timber to be cut; all attachments, accessions, accessories, fittings, increases, tools, parts, repairs, supplies, and commingled goods relating to the foregoing property, and all additions, replacements of and substitutions for all or any part of the foregoing property; all insurance refunds relating to the foregoing property; all good will relating to the foregoing property; all records and data and embedded software relating to the foregoing property, and all equipment, inventory and software to utilize, create, maintain and process any such records and data on electronic media; and all supporting obligations relating to the foregoing property; all whether now existing or hereafter arising, whether now owned or hereafter acquired or whether now or hereafter subject to any rights in the foregoing property; and all products and proceeds (including but not limited to all insurance payments) of or relating to the foregoing property.

E M. Tennieron					
	ESSEE/LESSOR CONSIGN	EE/CONSIGNOR BAIL	EE/BAILOR SELLER/BUYER	LO UEN	
 This FINANCING STATEMENT is to be filed for ESTATE RECORDS. Attach Addendum 	record] (or recorded) in the REAL		ARCH REPORT(S) on Debtor(s)	AG. LIEN	NON-UCC FILING
	[if applicable	ADDITIONAL FEET	[optional]		Debtor 1 Debtor 2
OPTIONAL FILER REFERENCE DATA			(optional)	y OCDIOIS	Debitor 7 Debitor 2

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UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY	
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT	
9a ORGANIZATION'S NAME	
OR 1870 NORTH DAMEN AVE., LLC	
9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX	
10. MISCELLANEOUS:	
THE ABOVE SPACE IS F 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names	OR FILING OFFICE USE ONLY
11a. ORGANIZATION'S NAME	
OR 11b INDIVIDUAL'S LAST NAME FIRST NAME ANDDOLS NAME	
FIRST NAME MIDDLE NAM	E SUFFIX
11c. MAILING ADDRESS CITY STATE TOO	
STATE	STAL CODE COUNTRY
ADDL INFO RE 11e. TYPE OF ORGANIZATION 1 JURISDICTION OF ORGANIZATION 11g. ORGANIZATION DEBTOR	ZATIONAL ID #, if any
10 LABOUTOUR AND THE STATE OF T	NONE
ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAML - insert only one name (12a or 12b)	
OR 12b. INDIVIDUAL'S LAST NAME MIDDLE NAME	
WIDDLE NAM	SUFFIX
2c. MAILING ADDRESS CITY STATE PO	STAL CODE COUNTRY
	STAL CODE COUNTRY
3. This FINANCING STATEMENT covers timber to be cut or collateral, or is filed as a fixture filing. 4. Description of real estate:	
Exhibit A.	
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5. Name and address of a RECORD OWNER of above-described real estate (if	
5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):	
5. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):	
Debtor does not have a record interest):	
17. Check only if applicable and check only one box.	
17. Check only if applicable and check only one box. Debtor is a Trust or Trustee acting with respect to property	neld in trust or □ Decadent's Estate
17. Check only if applicable and check only one box. Debtor is a Trust or Trustee acting with respect to property. 18. Check only if applicable and check only one box.	neld in trust or ☐ Decedent's Estate
17. Check only if applicable and check only one box. Debtor is a Trust or Trustee acting with respect to property.	neld in trust or □ Decadent's Estate

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LOT 29 IN BLOCK 9 IN PIERCE'S ADDITION TO HOLSTEIN IN SECTION 31, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PIN: 14-31-315-042-0000

Alliance Title Corporation
5523 N. Cumbelland Ave., Ste. 1211
Chicago, N. 60656
(773) 556-222